

P96000098331

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

EFFECTIVE DATE
12-4-96

FILED
 96 DEC -5 PM 2:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

AL DEC - 5 1996

RE: Home Health
Strategic, Inc

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign-Corp. File		
<input checked="" type="checkbox"/> () Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U B-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ()		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () pgs.		
SUBTOTALS		

600002020506--2
 12/05/96-01010-023-2
 ****122.50 ****122.50

REQUEST TAKEN CONFIRMED APPROVED
 DATE _____
 TIME _____
 BY AA P CK No. _____

WALK-IN
 Will Pick Up 125 1200

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

EFFECTIVE DATE
12-4-96

ARTICLES OF INCORPORATION
OF
HOME HEALTH STRATEGIES, INC.

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In compliance with the requirements of F.S. Chapter 607, the undersigned, being a natural person, does hereby act as an incorporator in adopting and filing the following articles of incorporation for the purpose of organizing a business corporation.

ARTICLE I

The name of the corporation ("Corporation") is HOME HEALTH STRATEGIES, INC.

ARTICLE II

The existence of the corporation shall begin on December 4, 1996.

ARTICLE III

The street address of the principal office of the Corporation is 1802 North University Drive., Plantation, Florida 33322..

ARTICLE IV

The maximum number of shares this Corporation is authorized to issue is 1000, all of which shall be Common Shares. All Common Shares shall be identical with each other in every respect and the holders of Common Shares shall be entitled to one vote for each share on all matters on which shareholders have the right to vote.

ARTICLE V

The initial street address of the Corporation's registered office is 1802 North University Drive, Plantation, Florida 33322. The initial registered agent for the Corporation at that address is Sherri B. Simpson, Esq.

ARTICLE VI

The initial board of directors shall consist of two members. The names and address of the persons who will serve on the initial board of directors are:

Prepared By:
Sherri B. Simpson, P.A.
6200 Stirling Road
Davie, Florida 33314
(954) 962-1966

Name
Nadine A. Hankin

Address
3801 N.W. 102 Ave
Coral Springs, Florida, 33065

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Krista Hankin

3801 N.W. 102 Ave
Coral Springs, Florida 33065

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII

The names and street addresses of the persons signing these articles of incorporation are:

<u>Name</u>	<u>Address</u>
Sherri B. Simpson	6200 Stirling Road Davie, Florida 33314

ARTICLE VIII

The corporation shall indemnify its directors, officers, employees, and agents to the fullest extent permitted by law.

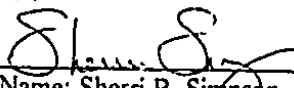
IN WITNESS WHEREOF, the undersigned incorporator has executed these articles of incorporation this 4 day of December, 1996.



Sherri B. Simpson

ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process for HOME HEALTH STRATEGIES, INC. at the place designated in the articles of incorporation, the undersigned is familiar with and accepts the obligations of that position pursuant to F.S. 607.0501(3).



Name: Sherri B. Simpson, Esq.

Date: December 4, 1996

Prepared By:
Sherri B. Simpson, P.A.
6200 Stirling Road
Davie, Florida 33314
(954) 962-1966